POLITICAL ACTION COMMITTEE (PAC) REGISTRATION FORM

To be filed with: Charlie Daniels, Secretary of State State Capitol, Room 026 Little Rock, AR 72201 Phone (501) 682-5070 Fax (501) 682-3408

Registration for calendar year 2006

For assistance in completing this form contact.
Arkansas Ethics Commission Post Office Box 1917
Little Rock, AR 72203
Phone (501) 324-9600
Toll Free (800) 422-7773

		Is this report	an amendment?	JYes ∐N	lo _	_	_					
Pl	ease indicate if thi	is PAC is to b	e registered as a Sma	all Donor P	AC?	Yes L	No					
Section One: PAC Name	<u>€</u> an acronym, the fu	all name of the	e PAC <u>and</u> the acron	ym should	be disclo	sed.		D				
Name of PAC (in full):	Arkansas REALTORS® Political Action Committee II JAN 17 2005											
Acronym (if applicable):	ARPAC II						RLIE DA					
SECRETARY OF STATE BY FPAC has no office address, use the address of the PAC officer authorized to receive notices on behalf of the PAC.												
Address:204 Executive Co	ourt, Ste 300			<u> </u>								
City <u>Little Rock</u>		_StateAR	Zip72205	Telepho	ne Numb	er	501-225	-2020				
Section Three: PAC Officers Provide the name, address, telephone number, and place of employment for each officer of the PAC.												
Name: <u>David Stobaugh</u>						_Title:	Chair					
Address: <u>805 W. Commer</u>						_Zip:	72949					
Place of Employment: United Country Stobaugh Properties						_Telephone Number: 479-667-1653						
Name: Ken Gill						_Title:	Vice Ch	air				
Address: 12015 Hinson		_City:	Little Rock	State:_	AR	_Zip:	72212					
Place of Employment:	Coldwell Banker	Advantage			_Telepho	ne Numi	ber:	501-224-1191				
Name: <u>Dorwin Shaddox</u>						_Title:	Secreta	ry-Treasurer				
Address:PO Box 1681	***************************************	_City:	Harrison	State:	AR	_Zip:	72601					
Place of Employment:	Shaddox Realty				_Telepho	ne Num	ber:	870-741-9007				
Name: Doug Smith					_Title:	Immedi	ate Past (Chairman				
Address: <u>11621 Rainwood</u>	I Road #4	_City:	Little Rock	State:_	AR	_Zip:	72212					
Place of Employment:	Adkins McNeill S	mith & Assoc	· · · · · · · · · · · · · · · · · · ·		_Telepho	ne Num	ber:	501-224-3900				

Section Four: Interests Represented Provide any professional, business, trade organization, association, corporation, lab	, labor, or other intel oor organization, or o	rests repr other grou	resented by the up or firm whose	PAC. Inclue interests v	ıde any i vill be re	ndividual presented	business, d by the PAC.		
Name of Interest Represented: Arkan	isas REALTORS As	sociation							
Address: 204 Executive Court, Ste 300		_City:	Little Rock	State:_	AR	Zip:	72205		
Name of Interest Represented:							***		
Address:	City:		State	:	Zip:				
Name of Interest Represented:		· · · · · · · · · · · · · · · · · · ·							
Address:	City:		State	·	Zip:				
Name of Interest Represented:									
Address:	City:		State	:	Zip:		<u>.</u>		
certify under oath that the above informa (4) years records evidencing (1) the name	tion is true and corre	Affidav ect. In ac	dition, I certify t	that I have	and shal	I maintair	n for a period of four		
(4) years records evidencing (1) the name, address, and place of employment of each person who contributed to the committee, along with the amount contributed and (2) the name and address of each candidate who received a contribution from the committee, along with the amount contributed. Signature of Committee Officer									
State of Arkansas									
County of Julaoli } ss.			_						
Subscribed and sworn before me this	<u>/ 7</u> day of _	Ja		, 20_C	ice 8	8007	Y		
(Legible Notary Seal) .		_ •			,				
My Commission Expires: 08-07-	2012	N F CONTRACTOR	OTARY OTARY OTARY OTARY	Management By Carlo					